## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee Connection Strategy	Date of Public Distribution/Dissemination
Ç,	10 27 2016
Mailing Address P.O. Box 2192	Amount
City State Zip Code	14663.89
Arlington VA 22202	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls  Category/ Type  004	10 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 02
Ashford, Brad, , ,	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	14663.89
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	14663.89
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	0 28 2016
Signature	